

13th International Laser Ranging Workshop October 7-11, 2002

Please complete the following and fax this form no later than Friday, August 23, 2002 and fax to Kathy Regul at 301-345-4659.
PLEASE NOTE: The Registration Fee is \$200.

NAME: LAST _____ FIRST _____

AFFILIATION: _____

STREET ADDRESS: _____

CITY/STATE/ZIP: _____

COUNTRY: _____ CITIZENSHIP: _____

PHONE NUMBER: _____ FAX NUMBER: _____

EMAIL: _____

Attendance Information

I plan to attend the Reception on Monday, October 7, 2002 ____ Yes ____ No

I plan to participate in the GGAO Tour ____ Yes ____ No

I plan to attend the Banquet Dinner on Thursday, October 10, 2002 ____ Yes ____ No (The fee for the dinner is \$40)

In addition:

I wish to purchase _____ Guest Banquet Tickets at \$40 each

If you wish to pay for your "Guest Banquet Tickets" by a SEPARATE credit card, please complete the second payment option block below. If you wish to pay for your General Registration Fee and Guest Banquet Tickets on the same credit card, please use the first payment option immediately below this paragraph.

Payment Information for the General Registration Fee and Guest Tickets (if paying everything by the same credit card or check)

Please submit the \$200 Registration Fee using one of the following methods:

Credit Card (We accept only American Express, Visa, or MasterCard)

Type of Credit Card: _____

Credit Card Number: _____, Exp. Date: _____

Name as it appears on card: _____

Signature of Cardholder: _____

Amount to be charged to my credit card: \$ _____

Please note that your credit card statement will show RS Information Systems as the merchant, and "Computer Software" or "Computer Products" as the description. For this reason, government issued travel cards will not accept the charge.

____ Check in the Mail: (Checks should be made payable to RS Information Systems)

*Purchase Order Number: _____

****PLEASE NOTE, if you are paying by PO or Training Request, you MUST mail the "original" document to Westover Consultants at the address shown on the Registration page. A faxed copy will not be accepted. All PO's should be made payable to RS Information Systems.***

Please print your name below again in case the second page gets separated from the first page when faxed.

YOUR NAME: _____

Payment Information for Guest Banquet Tickets Only (if paying by separate credit card or check)

Credit Card (We accept only American Express, Visa, or MasterCard)

Type of Credit Card: _____

Credit Card Number: _____, Exp. Date: _____

Name as it appears on card: _____

Signature of Cardholder: _____

Amount to be charged to my credit card: \$ _____

Please note that your credit card statement will show RS Information Systems as the merchant, and "Computer Software" or "Computer Products" as the description. For this reason, government issued travel cards will not accept the charge.

_____ Check in the Mail: (Checks should be made payable to RS Information Systems)